2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F37278

Entity Name: NORTH AMERICAN TITLE COMPANY

FILED Apr 07, 2008 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
700 NW 107 AVENUE SUITE 300 MIAMI, FL 33172 US							
Current Mailing Address:				New Mailing Address:			
700 NW 107 AVENUE SUITE 245 MIAMI, FL 33172			700 NW 107 AVENUE SUITE 400 MIAMI, FL 33172				
FEI Number:	FEI Number: 59-2114706 FEI Number Applied For () FEI Numb			nber Not Applicable () Certificate of Status Desired ()			
Name and Address of Current Registered Agent:					Name and Address of New Registered Agent:		
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 US							
The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.							
SIGNATURE:							
Electronic Signature of Registered Agent				Date			
Election Campaign Financing Trust Fund Contribution ().							
OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECT						TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	CH/D () EREED, LINDA 700 NW 107 AVE MIAMI, FL 33172			Title: Name: Address: City-St-Zip:	()	Change () Addition	
Title: Name: Address: City-St-Zip:	D () E PEKOR, ALLAN A 700 NW 107 AVE MIAMI, FL 33172	NUE, SUITE 100		Title: Name: Address: City-St-Zip:	FERNANDEZ, E	'ENUE, SUITE 300	
Title: Name: Address: City-St-Zip:	D () E KELLER, CLOTIL 700 NW 107 AVE MIAMI, FL 33172	NUE, SUITE 300		Title: Name: Address: City-St-Zip:	()	Change () Addition	
Title: Name: Address: City-St-Zip:	D/S () E FERNANDEZ, EN 700 NW 107 AVE MIAMI, FL 33172	MILIO ENUE, SUITE 300		Title: Name: Address: City-St-Zip:	MCREYNOLDS	'ENUE, SUITE 300	
Title: Name: Address: City-St-Zip:	SVP () EBLACK, ELAINE 700 NW 107 AVE MIAMI, FL 33172			Title: Name: Address: City-St-Zip:	()	Change () Addition	
Title: Name: Address: City-St-Zip:	VP/T () EBENSON, DONNI 700 NW 107 AVE MIAMI, FL 33172	NUE, SUITE 300		Title: Name: Address: City-St-Zip:	()	Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: EMILIO FERNANDEZ D/S 04/07/2008